IGH Vanguard Cities Summit Sharing Sessions: September 10-11, 2020

These two calls presented an opportunity for Vanguard Cities representatives to share their experiences from the past few months of addressing homelessness during the COVID-19 pandemic. Although each city had unique circumstances, there were a number of recurring themes in the attendees' presentations. A number of attendees emphasized the centrality of governmental action and accountability in addressing homelessness. Their testimonies highlighted the potential for success when governments allocate adequate resources and take a proactive role in facilitating the mission of homelessness service providers.

Many attendees also pointed out the importance of collaboration in the fight to end homelessness, whether in the form of cross-sectoral collaboration, alliances between service providers, or collaboration between governments and communities. Establishing effective coalitions enabled participants to be more effective than they would have been in isolation.

Other points of agreement included the importance of data in providing effective solutions to homelessness. The importance of effective homelessness systems monitoring capacity by way of by-name lists, coordinated intake systems, and access to real-time data was mentioned in a number of presentations. Homelessness service integration was also addressed by a number of attendees who pointed out the necessity of being able to carry out a holistic approach to homelessness through the provision of medical, mental health, and addiction related services to those experiencing homelessness, especially those with a high level of need.

11 September Sharing Session

Bengaluru, India

COVID-19 Response:

Keeping people distanced was an immediate challenge. They secured two schools from the government and three private schools to house people in need, which included migrants from rural areas who were stranded due to the lockdown and stoppage of transportation services. Measures taken to keep people physically distanced decreased the overall space for accommodating people in shelters. They emphasized the importance of preventative measures to limit the spread, which was particularly urgent after strict lockdown measures were eased. In an attempt to boost immunity, yoga sessions were held for respiratory health and herbal drinks distributed to increase immunity. Over 20,000 food packages were distributed over the course of three weeks.

Lessons Learned:

The pandemic underscored the inability of their shelter systems to deal with health emergencies and challenges such as those posed by COVID-19. The small size of shelters and the nature of congregate settings meant that their capacity was significantly reduced.

New Programs/Innovations Planned for the Future:

They plan to advocate for more expansive shelter space, more shelters overall, and the inclusion of 'sick rooms' in shelters to accommodate isolation of ill shelter users. Additionally,

they conducted a study to better understand the socioeconomic status of people using their services and their needs and to advocate more effectively for the people they serve.

Brussels, Belgium

COVID-19 Response:

Given the reduction of basic health and essential services, they shifted their approach to focusing on providing services related to primary needs. There was an increase of people needing these services due to an influx from people who work in the informal economy (e.g. sex workers, etc). The government opened confinement centers to isolate people who had tested positive for COVID-19. They were able to house approximately 800 people out of the estimated 900 who were living on the streets.

Lessons Learned:

The pandemic response made clear to them the ability of governments to address homelessness on a large scale and mobilize resources to this end when there is a commitment to do so. They found that getting people off the street and providing them with temporary housing helps to establish connections with medical practitioners and facilitates the transition to permanent housing.

Glasgow, Scotland

COVID-19 Response:

The Scottish government has used hotels to house approximately 600 people experiencing homelessness. Many companies providing accommodation have committed to using nearly all of their vacant accommodations to move people through the homelessness system. They have experienced an unexpected uptick in youth homelessness, the cause of which is currently unknown.

Lessons Learned:

The urgency created by the pandemic has reduced bureaucratic hurdles regarding time it takes to move people through the homelessness system. The pandemic has presented opportunities to reach people who were previously difficult to reach. It has also given them a more accurate view of homelessness, allowing them to address unmet needs of which they were previously unaware.

New Programs/Innovations Planned for the Future:

Suzanne Fitzpatrick will be carrying out research on behalf of IGH to get a better understanding of the situation. They have identified 139 people currently living in hotels who will be considered for Housing First programs and have connected 110 people to drug treatment that previously had no connection to addiction services.

Greater Manchester, United Kingdom

COVID-19 Response:

People living in shared accommodation were relocated to non-congregate settings such as hotels. New people identified as 'at-risk' were accommodated to keep them from ending up on the street. They focused on substance misuse harm reduction and undertook a concerted effort to address the needs of people who would not have been able to secure street drugs. Due to changes in legislation, they were able to better address the needs of asylum seekers and European Economic Area residents. They housed 495 people during the pandemic and were able to move 151 people into longer-term accommodation.

Lessons Learned:

Government buy-in led to funding for their efforts to move people off the streets and into accommodation, which in turn led to an ability to increase staff and capacity. The urgency of the situation resulted in a multi-agency response among a number of sectors such as police, substance abuse professionals, and the voluntary sector which resulted in effective collaboration.

Tshwane, South Africa

COVID-19 Response:

The COVID-19 lockdown prompted a conversation in society about homelessness as a problem, which is significant given the absence of national homelessness policy in South Africa. A moratorium on evictions was issued, but this has not stopped evictions from taking place. Only one government shelter was available to house people, and this shelter was overcrowded and in poor shape. A sports stadium was used to house ~2,000 people, though infrastructure was lacking here as well.

In collaboration with the Local Homelessness Forum in Tshwane, they were able to open 25 temporary shelters and house between 1,500 and 2,000 people within nine weeks. This took place due to collaboration between over 24 organizations including civil society members, local government, and universities. Their efforts led to an unprecedented access to healthcare for homeless people, and they were able to administer medicine and provide social services to people in the shelters. They established a call center for shelter placement and intake to ensure nobody got "lost in the system" and were also able to quickly train people in homeless service provision.

Lessons Learned:

Wayne Renkin noted the importance of these collaborative efforts in his report on the COVID-19 response effort by Tshwane, South Africa, explaining that "collaboration and partnerships are extremely painful but [also] essential. They must be built on common values, trust, transparency, and a commitment and solidarity between organizations." They also emphasized the necessity of having holistic and integrated healthcare and psychosocial services for people experiencing homelessness and also for conceptualizing homelessness and an issue of extreme poverty and injustice, which the pandemic has highlighted.

Santiago, Chile

COVID-19 Response:

They established a street protection program - "Protege Calle" - consisting of four planks: 1) an emergency hotline to allow people to notify them when someone on the street is in need of help; 2) "Route COVID-19," cars from the ministry sent around to bring the homeless food, clothing and medicine; 3) emergency shelters; and 4) a Housing First program. They established 180 new shelters. The homeless COVID-19 infection rate was much lower than they initially expected, possibly due to increased immunity among the homeless population, but this is not certain. Police were also involved in homeless outreach efforts and delivering supplies to homeless people. They contracted with city mayors to establish homeless shelters in neighborhoods.

10 September Sharing Session Adelaide, Australia

COVID-19 Response:

The Adelaide Zero Project is made up of over 40 organizations including the state governments, nonprofits, and universities. They housed 72 people in July alone, their highest housing rate thus far. Although housing was on offer, there were some people who chose to not take advantage of the accommodation. Over 500 people were given accommodation and case management support during their COVID-19 response efforts. Additionally, the number of people housed from June to August exceed their inflow. Their collaborative governance structure allowed them to develop and deliver multi-agency responses quickly, with the by-name list being essential to their operations. They estimate that 98 people were still sleeping rough during the pandemic response, mostly due to their high/complex needs.

Lessons Learned:

The Adelaide mobilization for dealing with COVID-19 serves as an example of what can happen when governments and communities work together in difficult circumstances, although having such large coalitions as they have can at times be difficult to manage. Having the Functional Zero infrastructure already established made it easier for them to address the issues caused by the pandemic and gave them a head start on the response. They also mentioned a need for more culturally-appropriate responses to homelessness for aboriginal people.

Edmonton, Alberta, CA

COVID-19 Response:

Many of their day services were moved to the Expo Center, where services were provided to between 650 and 800 people per day. Despite their typically being oriented toward Housing First and permanent supportive housing solutions, they shifted their focus toward addressing people's immediate needs. Their rate of housing rose from 110 people per month to 140 people per month. This occurred despite not being able to show suites, highlighting the innovation that occurred due to necessity caused by the pandemic.

Lessons Learned:

The pandemic exposed the siloed nature of their systems, which they have been working on integrating.

Little Rock, Arkansas, U.S.

COVID-19 Response:

Their response started with no sort of coordinated entry or by-name list systems. Rather than house people in congregate settings, they opted to house them outdoors in tents to control spread of COVID-19. This approach resulted in low rates of COVID-19 in the homeless population at this particular encampment. They were able to house 25 people during their response.

Lessons Learned:

The issues caused by a lack of organizational capacity underscored the urgent need to establish by-name lists and coordinate entry systems. In contrast to other examples given by cities of the potential successes that come from effective collaboration between governments and civil society, the case of Little Rock unfortunately highlights the negative effects of government negligence.

New Programs/Innovations Planned for the Future:

They are currently advocating for the Continuum of Care in Little Rock, AR to address issues related to coordinated entry and having better data around homelessness.

Sydney, Australia

COVID-19 Response:

The government of New South Wales provided \$34M for temporary accommodation as well as \$36M for housing and support packages for people with more intensive needs. Staff was shared between service providers to ensure service provision to those housed in hotels. Approximately 20 people per week were housed in Sydney.

Lessons Learned:

COVID-19 response in New South Wales shows the benefits of collaboration, and the pandemic presented an opportunity to bring homelessness service providers together. The pandemic highlighted the importance of having by-name lists and real-time data to solve homelessness. Their response also reinforced the importance of health and homelessness services working together and demonstrated that this was a realistic goal.

New Programs/Innovations Planned for the Future:

They are updating their by-name list system for real-time use and for use in multiple communities as well as focusing on implementation of these systems.